

STANDING CHAPTER 13 TRUSTEE ALEJANDRO OLIVERAS RIVERA
REPORT OF ACTION TAKEN
MEETING OF CREDITORS

In re:

JOAQUIN CANCEL MONTALVO
 DIVINA LLANERA ROMAN

Chapter 13

Case No. 10-09215-ESL

Attorney Name: JOSE PRIETO CARBALLO ESQ*

I. Appearances		Date: December 02, 2010 Time: 8:14 AM Track: _____ <input type="checkbox"/> This is debtor(s) <input checked="" type="checkbox"/> Bankruptcy filing. Liquidation Value: \$11,000. - Creditors <i>basc</i> _____									
Debtor <input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent Joint Debtor <input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent Attorney for Debtor <input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent <input type="checkbox"/> Pro-se <input type="checkbox"/> Substitute _____											
II. Oath Administered <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
III. Documents Filed/Provided <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <input checked="" type="checkbox"/> Schedules <input checked="" type="checkbox"/> Statement of Financial Affairs (SOFA) <input checked="" type="checkbox"/> Statement of Current Monthly Income (SCMI) <input checked="" type="checkbox"/> Credit counseling briefing certificate (CCC) <input type="checkbox"/> Waiver requested by debtor(s) <input type="checkbox"/> DSO Certificate </td> <td style="width: 50%;"> <input type="checkbox"/> DSO Recipient's information <input type="checkbox"/> State Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Federal Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Evidence of income (60 days prior to petition) </td> </tr> </table> <p style="text-align: right; margin-top: 10px;"><i>* See Dec negotiations since 1992</i></p>				<input checked="" type="checkbox"/> Schedules <input checked="" type="checkbox"/> Statement of Financial Affairs (SOFA) <input checked="" type="checkbox"/> Statement of Current Monthly Income (SCMI) <input checked="" type="checkbox"/> Credit counseling briefing certificate (CCC) <input type="checkbox"/> Waiver requested by debtor(s) <input type="checkbox"/> DSO Certificate	<input type="checkbox"/> DSO Recipient's information <input type="checkbox"/> State Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Federal Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Evidence of income (60 days prior to petition)						
<input checked="" type="checkbox"/> Schedules <input checked="" type="checkbox"/> Statement of Financial Affairs (SOFA) <input checked="" type="checkbox"/> Statement of Current Monthly Income (SCMI) <input checked="" type="checkbox"/> Credit counseling briefing certificate (CCC) <input type="checkbox"/> Waiver requested by debtor(s) <input type="checkbox"/> DSO Certificate	<input type="checkbox"/> DSO Recipient's information <input type="checkbox"/> State Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Federal Tax Returns <i>n/a</i> <input type="checkbox"/> Returned <input type="checkbox"/> Evidence of income (60 days prior to petition)										
IV. Status of Meeting <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Not Held <input type="checkbox"/> Continued _____ at _____											
V. Trustee's Report on Confirmation <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> <input type="checkbox"/> FAVORABLE <input checked="" type="checkbox"/> UNFAVORABLE </td> <td style="width: 50%;"> <input type="checkbox"/> No DSO certificate (Post-petition) <input type="checkbox"/> Evidence of income <input type="checkbox"/> Missing <input type="checkbox"/> Incomplete <input type="checkbox"/> Stmt. of Current Monthly Income <input type="checkbox"/> Incomplete <input type="checkbox"/> Missing <input type="checkbox"/> Fails commitment period <input type="checkbox"/> Fails Disp. Income </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> <input type="checkbox"/> Feasibility <input checked="" type="checkbox"/> Insufficiently funded <input type="checkbox"/> Unfair discrimination <input type="checkbox"/> Fails liquidation value test <input type="checkbox"/> Fails disposable income test (I & J) <input type="checkbox"/> No provision for secured creditor(s) </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> <input type="checkbox"/> Treat value of collateral separately <input type="checkbox"/> No provision for insurance <input type="checkbox"/> Tax returns missing <input type="checkbox"/> State - years _____ <input type="checkbox"/> Federal - years _____ </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> <input type="checkbox"/> Incomplete schedules <input type="checkbox"/> Incomplete S.O.F.A. <input type="checkbox"/> Other: _____ </td> </tr> </table>				<input type="checkbox"/> FAVORABLE <input checked="" type="checkbox"/> UNFAVORABLE	<input type="checkbox"/> No DSO certificate (Post-petition) <input type="checkbox"/> Evidence of income <input type="checkbox"/> Missing <input type="checkbox"/> Incomplete <input type="checkbox"/> Stmt. of Current Monthly Income <input type="checkbox"/> Incomplete <input type="checkbox"/> Missing <input type="checkbox"/> Fails commitment period <input type="checkbox"/> Fails Disp. Income	<input type="checkbox"/> Feasibility <input checked="" type="checkbox"/> Insufficiently funded <input type="checkbox"/> Unfair discrimination <input type="checkbox"/> Fails liquidation value test <input type="checkbox"/> Fails disposable income test (I & J) <input type="checkbox"/> No provision for secured creditor(s)		<input type="checkbox"/> Treat value of collateral separately <input type="checkbox"/> No provision for insurance <input type="checkbox"/> Tax returns missing <input type="checkbox"/> State - years _____ <input type="checkbox"/> Federal - years _____		<input type="checkbox"/> Incomplete schedules <input type="checkbox"/> Incomplete S.O.F.A. <input type="checkbox"/> Other: _____	
<input type="checkbox"/> FAVORABLE <input checked="" type="checkbox"/> UNFAVORABLE	<input type="checkbox"/> No DSO certificate (Post-petition) <input type="checkbox"/> Evidence of income <input type="checkbox"/> Missing <input type="checkbox"/> Incomplete <input type="checkbox"/> Stmt. of Current Monthly Income <input type="checkbox"/> Incomplete <input type="checkbox"/> Missing <input type="checkbox"/> Fails commitment period <input type="checkbox"/> Fails Disp. Income										
<input type="checkbox"/> Feasibility <input checked="" type="checkbox"/> Insufficiently funded <input type="checkbox"/> Unfair discrimination <input type="checkbox"/> Fails liquidation value test <input type="checkbox"/> Fails disposable income test (I & J) <input type="checkbox"/> No provision for secured creditor(s)											
<input type="checkbox"/> Treat value of collateral separately <input type="checkbox"/> No provision for insurance <input type="checkbox"/> Tax returns missing <input type="checkbox"/> State - years _____ <input type="checkbox"/> Federal - years _____											
<input type="checkbox"/> Incomplete schedules <input type="checkbox"/> Incomplete S.O.F.A. <input type="checkbox"/> Other: _____											

STANDING CHAPTER 13 TRUSTEE ALEJANDRO OLIVERAS RIVERA
REPORT OF ACTION TAKEN
MEETING OF CREDITORS

In re:

JOAQUIN CANCEL MONTALVO
DIVINA LLANERA ROMAN

Chapter 13

Case No. 10-09215-ESL

Attorney Name: JOSE PRIETO CARBALLO ESQ*

VI. Plan

(Cont.)

Date: September, 30, 2010 Base \$ 11,100.00 Filed Evidence of Pmt shown: _____
Payments 1 made out of 2 due. Not Filed

VII. Confirmation Hearing Date: December, 1, 2010

VIII. Attorney's fees as per R. 2016(b)

\$3,000.00 - \$ 326.00 = \$ 2,674.00

IX. Documents to be provided w/in ____ days

Amended schedules I

Amended S.O.F.A. _____

Insurance estimate

Amended plan

Assumption/Rejection executory contract

Business Documents

Appraisal _____

Monthly reports for the months

State tax returns years _____

Public Liability Insurance

Federal tax returns years _____

Premises _____

Correct SS # (Form B21)

Vehicle(s) _____

Debtor Joint debtor

Licenses issued by:

Other: _____

Treasury - IVN.

M.T.D. to be filed by Trustee: Debtor(s): failed to appear; failed to commence payments;

failed to keep payments current; does (do) not qualify as a debtor (\$109); _____

Other: _____

COMMENTS

① Amend Schedule I to add \$350.00 as rental income. Debtor testifies his daughter does not provide them with \$800 a month, but with \$400. Consequently this poses a feasibility issue since it is \$500 less income and the payment is \$185.00 ② Provide description for both parties listed in schedule A. ③ Debtors will delete tax refund provision from plan. Debtors do not have unsecured debts.

Alejandro Oliveras Rivera

Trustee/Presiding Officer

Date: December 02, 2010

(Rev.)